

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)		2 Total pages filed: <b>25</b>	
3 CANDIDATE/ OFFICEHOLDER NAME	TITLE	FIRST	MI	OFFICE USE ONLY	
	Mr	John	G.		
NICKNAME	LAST	SUFFIX			
	Clamp			Date Received	
4 CANDIDATE/ OFFICEHOLDER ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;		APT / SUITE #;	CITY;	STATE; ZIP CODE
	8531 N. New Braunfels		205	San Antonio, TX 78217	
5 CAMPAIGN TREASURER NAME	TITLE	FIRST	MI	Date Hand-delivered or Date Postmarked	
	Mr.	Steve	B.	Receipt # Amount	
	NICKNAME	LAST	SUFFIX	Date Processed	
	Grau			Date Imaged	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE
	15873 Redwoods Manor			San Antonio, TX 78247	
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(210)	834-1272			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (attach C/OH - FR)				
9 PERIOD COVERED	3/25/03 THROUGH 4/23/03				
10 ELECTION	ELECTION DATE	ELECTION TYPE			
	5/3/03	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)		
			City Councilman District 10		
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure.				
	Name				
	Address / PO Box;    Apt. / Suite #;    City;    State;    Zip Code				
<input type="checkbox"/> additional page					

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT TOTALS

FORM C/OH  
COVER SHEET PG 2

14 FILER NAME

John G. Clamp

15 ACCOUNT # (Ethics Commission filers)

16 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)

\*\* This box is for notice of political expenditures by political committees to support the candidate/officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. \*\*

COMMITTEE TYPE

COMMITTEE NAME

☒ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional page

COMMITTEE CAMPAIGN TREASURER ADDRESS

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK  
2003 APR 28 A 10:25

17 NO  
REPORTABLE  
ACTIVITY

☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)\$ 13,390<sup>00</sup>EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 12,672.99

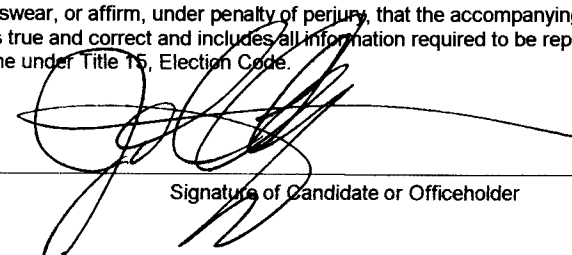
OUTSTANDING  
LOAN TOTALS

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

19 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

  
Signature of Candidate or Officeholder

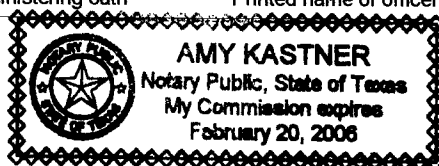
AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, be the said John G. Clamp, this the 25<sup>th</sup> day of April, 20 03, to certify which, witness my hand and seal of office.

  
Signature of officer administering oath

Amy Kastner  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath



Revised 05/11/2000

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**  
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,  
SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule A1: 12

2 FILER NAME

John G. Clamp

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/10/03

5 Full name of contributor

Deborah Bauer

☐ out-of-state PAC ID#

6 Contributor address;

2 Champions Mark

City; State; Zip Code

San Antonio, TX 78258

7 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

4/10/03

Full name of contributor

Mr Clarence J. Kahlig, II

☐ out-of-state PAC ID#

Contributor address;

9207 San Pedro

City; State; Zip Code

San Antonio, TX 78216

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/9/03

Full name of contributor

Mr & Mrs Robert Rork

☐ out-of-state PAC ID#

Contributor address;

500 Geneseo

City; State; Zip Code

San Antonio, TX 78209

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/11/03

Full name of contributor

Donze Lopez

☐ out-of-state PAC ID#

Contributor address;

231 Brees

City; State; Zip Code

San Antonio, TX 78209

Amount of  
contribution (\$)

\$500.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/10/03

Full name of contributor

Mr and Mrs Cynthia Harwell

☐ out-of-state PAC ID#

Contributor address;

POB 17065

City; State; Zip Code

San Antonio, TX 78217

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**  
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,  
SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1: 12

2 FILER NAME

John G. Clamp

3 ACCOUNT # (Ethics Commission filers)

4 Date  
4/10/03

5 Full name of contributor ☐ out-of-state PAC ID#

John A. Worthington

6 Contributor address; City; State; Zip Code

2614 Pebble Dawn San Antonio, TX 78232

7 Amount of  
contribution (\$)  
\$50.00

8 In-kind contribution  
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date  
4/10/03

Full name of contributor ☐ out-of-state PAC ID#

J. Cary Barton

Contributor address; City; State; Zip Code

One Riverwalk Place, Suite San Antonio, TX 78205

Amount of  
contribution (\$)  
\$250.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date  
4/10/03

Full name of contributor ☐ out-of-state PAC ID#

Mr. Phil Crane

Contributor address; City; State; Zip Code

519 Xavier San Antonio, TX 78232

Amount of  
contribution (\$)  
\$50.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date  
4/10/03

Full name of contributor ☐ out-of-state PAC ID#

Mr & Mrs Ken Espensen

Contributor address; City; State; Zip Code

2122 Encino Loop San Antonio, TX 78259

Amount of  
contribution (\$)  
\$250.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date  
4/10/03

Full name of contributor ☐ out-of-state PAC ID#

Mr Greg Houston

Contributor address; City; State; Zip Code

16711 Canyon Ledge San Antonio, TX 78232

Amount of  
contribution (\$)  
\$250.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1 (FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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2 FILER NAME

John G. Clamp

3 ACCOUNT # (Ethics Commission filers)

4 Date  
4/21/03

5 Full name of contributor ☐ out-of-state PAC ID#

Mr and Mrs Harold Gadsby

6 Contributor address; City; State; Zip Code

10555 O'Connor Rd San Antonio, TX 78233

7 Amount of  
contribution (\$)  
\$500.00

8 In-kind contribution  
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date  
4/10/03

Full name of contributor ☐ out-of-state PAC ID#

Rhode Realty Property Management

Contributor address; City; State; Zip Code

85 NE Loop 410, #100 San Antonio, TX 78216

Amount of  
contribution (\$)  
\$100.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date  
4/14/03

Full name of contributor ☐ out-of-state PAC ID#

Mr & Mrs Terry Bunker

Contributor address; City; State; Zip Code

14942 FM 346 E. Troup, TX 75789

Amount of  
contribution (\$)  
\$25.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date  
4/10/03

Full name of contributor ☐ out-of-state PAC ID#

Baumgardner Properties

Contributor address; City; State; Zip Code

12330 West Avenue, Suite 2 San Antonio, TX 78216

Amount of  
contribution (\$)  
\$250.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date  
4/10/03

Full name of contributor ☐ out-of-state PAC ID#

Mr & Mrs Mark Cavender

Contributor address; City; State; Zip Code

15 Vaux Hall San Antonio, TX 78209

Amount of  
contribution (\$)  
\$250.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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CITY CLERK  
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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1 (FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.		1 Total pages this Schedule A1: 12	
2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/11/03</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr. Don Walker</i> 6 Contributor address; City; State; Zip Code <i>10010 San Pedro, Suite 700 San Antonio, TX 78218</i>	7 Amount of contribution (\$) <i>\$450.00</i>	8 In-kind contribution description (if applicable) <i>Lunch</i>
9 Principal occupation (Optional)		10 Employer (Optional)	
Date <i>4/11/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr J. Bruce Bugg, Jr.</i> Contributor address; City; State; Zip Code <i>410 Elizabeth Road San Antonio, TX 78209</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>4/9/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr and Mrs Peter Holt</i> Contributor address; City; State; Zip Code <i>2191 Little Blanco Road Blanco, TX 78606</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>4/4/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr &amp; Mrs Joe McKinney</i> Contributor address; City; State; Zip Code <i>6110 Yorkshire Dr. San Antonio, TX 78070</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>4/10/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>David W. Monnich</i> Contributor address; City; State; Zip Code <i>P.O.Box 460481 San Antonio, TX 78246</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

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 CLERK  
 2003 APR 28 A 10:25

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/14/03</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr. Gene Powell</i> 6 Contributor address; City; State; Zip Code <i>11 Lynn Batts Lane, Suite 1 San Antonio, TX 78218</i>	7 Amount of contribution (\$) <i>\$500.00</i>	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date <i>4/11/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr. Larry Heimer</i> Contributor address; City; State; Zip Code <i>10000 San Pedro Ave, Suite San Antonio, TX 78215</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>4/11/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr. Michael W. Lackey</i> Contributor address; City; State; Zip Code <i>3710 Mary Mont Dr. San Antonio, TX 78217</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>4/11/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr. Zachry Steven Lee</i> Contributor address; City; State; Zip Code <i>970 Isom Road San Antonio, TX 78216</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>4/11/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr. Milton Guess</i> Contributor address; City; State; Zip Code <i>800 Navarro St, Ste 210 San Antonio, TX 78205</i>	Amount of contribution (\$) <i>\$200.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

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APR 28 10:25 AM '03

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1 (FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/10/03</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Leo F. Perron, Jr.</i> 6 Contributor address; City; State; Zip Code <i>3707 N. St. Mary's Street, # San Antonio, TX 78212</i>	7 Amount of contribution (\$) <i>\$150.00</i>	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date <i>4/18/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>John Hill</i> Contributor address; City; State; Zip Code <i>930 Clydeville Rd San Antonio, TX 78216</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>4/8/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>LAN-PAC</i> Contributor address; City; State; Zip Code <i>1500 City West Blvd Houston, TX 77042</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>4/14/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Northern Hills Country Village Owner's Association</i> Contributor address; City; State; Zip Code <i>99 Suncrest Lane San Antonio, TX 78217</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>4/11/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr. Lloyd A. Denton</i> Contributor address; City; State; Zip Code <i>7979 Broadway, Suite 101 San Antonio, TX 78209</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**  
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,  
SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1: 12

2 FILER NAME

John G. Clamp

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/28/03

5 Full name of contributor

Mr. James Fisher, III

☐ out-of-state PAC ID#

6 Contributor address;

City; State; Zip Code

3813 Mockingbird

Dallas, TX 75205

7 Amount of  
contribution (\$)

\$995.00

8 In-kind contribution  
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

3/28/03

Full name of contributor

Mr. James Fisher, II

☐ out-of-state PAC ID#

Contributor address;

City; State; Zip Code

3813 Mockingbird

Dallas, TX 75205

Amount of  
contribution (\$)

\$995.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

3/28/03

Full name of contributor

Mr and Mrs Don Strong

☐ out-of-state PAC ID#

Contributor address;

City; State; Zip Code

411 Rio Seco

San Antonio, TX 78232

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

3/28/03

Full name of contributor

LtCol (Ret) Norris W. Yates

☐ out-of-state PAC ID#

Contributor address;

City; State; Zip Code

2118 Kenilworth Blvd

San Antonio, TX 78209

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

3/27/03

Full name of contributor

Andy Little

☐ out-of-state PAC ID#

Contributor address;

City; State; Zip Code

12508 Jones Maltsberger, S San Antonio, TX 78247

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1 (FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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2 FILER NAME

John G. Clamp

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/28/03

5 Full name of contributor

☐ out-of-state PAC ID#

Mr and Mrs Archie Patterson

6 Contributor address;

City; State; Zip Code

13619 Scarsdale

San Antonio, TX 78217

7 Amount of  
contribution (\$)

\$30.00

8 In-kind contribution  
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

3/28/03

Full name of contributor

☐ out-of-state PAC ID#

Mr. David Cortez

Contributor address;

City; State; Zip Code

218 Produce Row

San Antonio, TX 78207

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

3/28/03

Full name of contributor

☐ out-of-state PAC ID#

Mr. R. R. Ressmann

Contributor address;

City; State; Zip Code

3715 Mary Mont

San Antonio, TX 78217

Amount of  
contribution (\$)

\$150.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

3/28/03

Full name of contributor

☐ out-of-state PAC ID#

Mr & Mrs G. H. Wieters

Contributor address;

City; State; Zip Code

9510 Hillsboro

San Antonio, TX 78217

Amount of  
contribution (\$)

\$20.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

3/28/03

Full name of contributor

☐ out-of-state PAC ID#

Mr Joseph G. Gaydos

Contributor address;

City; State; Zip Code

26014 Lane Beaver

San Antonio, TX 78258

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/10/03</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr &amp; Mrs Arthur Sitterle, III</i> 6 Contributor address; City; State; Zip Code <i>117 Lilac Lane San Antonio, TX 78209</i>	7 Amount of contribution (\$) <i>\$100.00</i>	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date <i>3/27/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Michael &amp; Joyce Arizpe</i> Contributor address; City; State; Zip Code <i>835 Arizpe Rd. Cibola, TX 78108</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>3/28/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr &amp; Mrs Harold Gadsby</i> Contributor address; City; State; Zip Code <i>13069 IH35 North San Antonio, TX 78233</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>3/28/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Col &amp; Mrs Charles Crawford</i> Contributor address; City; State; Zip Code <i>15731 Deer Crest San Antonio, TX 78248</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>3/28/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr and Mrs Ruben Cortez</i> Contributor address; City; State; Zip Code <i>26 Inwood Autumn San Antonio, TX 78248</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1 (FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.		1 Total pages this Schedule A1: 12	
2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>3/29/03</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr and Mrs Robert Piechnik</i> 6 Contributor address; City; State; Zip Code <i>19520 Horizon View San Antonio, TX 78232</i>	7 Amount of contribution (\$) <i>\$75.00</i>	8 In-kind contribution description (if applicable) <i>Invitations/Postage</i>
9 Principal occupation (Optional)		10 Employer (Optional)	
Date <i>3/25/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr and Mrs Hans Nadler</i> Contributor address; City; State; Zip Code <i>43 Greens Shade San Antonio, TX 78216</i>	Amount of contribution (\$) <i>\$750.00</i>	In-kind contribution description (if applicable) <i>Invitations/Postage</i>
Principal occupation (Optional)		Employer (Optional)	
Date <i>3/26/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Zachry S. Lee</i> Contributor address; City; State; Zip Code <i>970 Isom Rd San Antonio, TX 78216</i>	Amount of contribution (\$) <i>\$200.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>4/4/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr &amp; Mrs Edward Wigginton</i> Contributor address; City; State; Zip Code <i>4706 Parmenter San Antonio, TX 78217</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>3/27/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr &amp; Mrs Jeffrey Brown</i> Contributor address; City; State; Zip Code <i>2242 Estate View Drive San Antonio, TX 78260</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A1**  
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,  
SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.		1 Total pages this Schedule A1: 12	
2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/1/03</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Col &amp; Mrs Kenneth Ports</i> 6 Contributor address; City; State; Zip Code <i>438 Forest Hill San Antonio, TX 78209</i>	7 Amount of contribution (\$) <i>\$50.00</i>	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date <i>3/31/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Tim Kerley</i> Contributor address; City; State; Zip Code <i>P.O. Box 17187 San Antonio, TX 78217</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>3/31/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Douglas C. Beach</i> Contributor address; City; State; Zip Code <i>217 Alamo Plaza San Antonio, TX 78205</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>3/31/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Dolores M. Ibarra</i> Contributor address; City; State; Zip Code <i>202 Birchleaf San Antonio, TX 78216</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date <i>3/30/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Oralia Salame</i> Contributor address; City; State; Zip Code <i>13715 Briar Meadow San Antonio, TX 78217</i>	Amount of contribution (\$) <i>\$125.00</i>	In-kind contribution description (if applicable) <i>Invitations/Postage</i>
Principal occupation (Optional)		Employer (Optional)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A1 (FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.			1 Total pages this Schedule A1: 12	
2 FILER NAME <i>John G. Clamp</i>			3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>3/28/03</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Lindal Hardwick</i>	7 Amount of contribution (\$) <i>\$25.00</i>	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code <i>1031 Hot Wells Blvd San Antonio, TX 78223</i>				
9 Principal occupation (Optional)		10 Employer (Optional)		
Date <i>3/28/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Jack A. Baker</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>89 Oakwell Farms Parkway San Antonio, TX 78218</i>				
Principal occupation (Optional)		Employer (Optional)		
Date <i>3/30/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Pat Garrison</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>212 Ivy Lane San Antonio, TX 78209</i>				
Principal occupation (Optional)		Employer (Optional)		
Date <i>4/1/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Dr &amp; Mrs. Frank L. Bond</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>2311 Harry Wurzbach San Antonio, TX 78209</i>				
Principal occupation (Optional)		Employer (Optional)		
Date <i>4/1/03</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# <i>Mr &amp; Mrs John Wiley</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <i>214 Five Oaks San Antonio, TX 78209</i>				
Principal occupation (Optional)		Employer (Optional)		

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**POLITICAL EXPENDITURES****SCHEDULE F**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages this Schedule F: 9	
2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/1/03</i>	5 Payee name <i>8531 N. New Braunfels, Ltd</i> 6 Payee address; City; State; Zip Code <i>8531 N. New Braunfels, Ste San Antonio, TX 78217</i>	7 Amount (\$) <i>\$575.00</i>	
8 Purpose of payment (See instructions regarding type of information required.) <i>Rent</i>		9 ** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held	
Date <i>4/23/03</i>	Payee name <i>Dollar General</i> Payee address; City; State; Zip Code <i>13930 Nacogdoches San Antonio, TX 78217</i>	Amount (\$) <i>\$280</i>	
Purpose of payment (See instructions regarding type of information required.) <i>Cable Ties</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held	
Date <i>4/23/03</i>	Payee name <i>Express-News</i> Payee address; City; State; Zip Code <i>Avenue E and 3rd Street San Antonio, TX 78205</i>	Amount (\$) <i>\$418.20</i>	
Purpose of payment (See instructions regarding type of information required.) <i>Ad</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held	
Date <i>4/23/03</i>	Payee name <i>Capparelli's</i> Payee address; City; State; Zip Code <i>8503 Broadway San Antonio, TX 78217</i>	Amount (\$) <i>\$22.60</i>	
Purpose of payment (See instructions regarding type of information required.) <i>Campaign Working Lunch</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages this Schedule F: 9
2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>4/18/03</i>	5 Payee name <i>Zito's</i> 6 Payee address; City; State; Zip Code <i>8800 Broadway San Antonio, TX 78217</i>	7 Amount (\$) <i>\$50.50</i>
8 Purpose of payment (See instructions regarding type of information required.) <i>Working Lunch-Steering Committee</i>		9 ** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held
Date <i>4/21/03</i>	Payee name <i>The Catalyst Company</i> Payee address; City; State; Zip Code <i>1110 Branch Spring San Antonio, TX 78258</i>	Amount (\$) <i>\$2,056.50</i>
Purpose of payment (See instructions regarding type of information required.) <i>Design/Print/Mail</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held
Date <i>4/22/03</i>	Payee name <i>Zito's</i> Payee address; City; State; Zip Code <i>8800 Broadway San Antonio, TX 78217</i>	Amount (\$) <i>\$25.11</i>
Purpose of payment (See instructions regarding type of information required.) <i>Campaign Working Lunch</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held
Date <i>4/3/03</i>	Payee name <i>Clear Channel Outdoor</i> Payee address; City; State; Zip Code <i>3714 N. Pan am Expresswa San Antonio, TX 78219</i>	Amount (\$) <i>\$5,150.00</i>
Purpose of payment (See instructions regarding type of information required.) <i>Billboards</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held

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## 2 FILER NAME

John G. Clamp

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/17/03

5 Payee name

Express-News

6 Payee address;

POB 2171

City; State; Zip Code

San Antonio, TX 78297

7

Amount

(\$)

\$451.44

8 Purpose of payment (See instructions regarding type of information required.)

Newspaper Ad

9 \*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate/Officeholder name Office sought Office held

Date

4/18/03

Payee name

United States Postal Service

Payee address;

North Broadway Station

City; State; Zip Code

San Antonio, TX 78217

Amount

(\$)

\$2.12

Purpose of payment (See instructions regarding type of information required.)

Postage

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate/Officeholder name Office sought Office held

Date

4/18/03

Payee name

United States Postal Service

Payee address;

North Broadway Station

City; State; Zip Code

San Antonio, TX 78217

Amount

(\$)

\$111.00

Purpose of payment (See instructions regarding type of information required.)

Postage

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate/Officeholder name Office sought Office held

Date

4/18/03

Payee name

The Home Depot

Payee address;

4909 Windsor Hill

City; State; Zip Code

San Antonio, TX 78239

Amount

(\$)

\$4.70

Purpose of payment (See instructions regarding type of information required.)

Rebar

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate/Officeholder name Office sought Office held

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**POLITICAL EXPENDITURES****SCHEDULE F**

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## 2 FILER NAME

John G. Clamp

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/15/03

5 Payee name

The Home Depot

6 Payee address;

City; State; Zip Code

8138 Agora Pkwy

Selma, TX 78154

7

Amount

(\$)

\$25.95

8 Purpose of payment (See instructions regarding type of information required.)

Stakes

9 \*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate/Officeholder name Office sought Office held

Date

4/14/03

Payee name

The Home Depot

Payee address;

City; State; Zip Code

8138 Agora Pkwy

Selma, TX 78154

Amount

(\$)

\$18.84

Purpose of payment (See instructions regarding type of information required.)

Rebar

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate/Officeholder name Office sought Office held

Date

4/16/03

Payee name

McCoy's

Payee address;

City; State; Zip Code

11511 Perrin Beitel

San Antonio, TX 78217

Amount

(\$)

\$4.95

Purpose of payment (See instructions regarding type of information required.)

Nails

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate/Officeholder name Office sought Office held

Date

4/16/03

Payee name

The Home Depot

Payee address;

City; State; Zip Code

1066 Central Pkwy

San Antonio, TX 78232

Amount

(\$)

\$9.39

Purpose of payment (See instructions regarding type of information required.)

Rebar

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate/Officeholder name Office sought Office held

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**POLITICAL EXPENDITURES**

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SCHEDULE F

The Instruction Guide explains how to complete this form.		1 Total pages this Schedule F: 9	
2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/12/03</i>	5 Payee name <i>Mailbox Express</i> 6 Payee address; City; State; Zip Code <i>8200 Pat Booker Rd Universal City, TX 78148</i>	7 Amount (\$) <i>\$37.00</i>	
8 Purpose of payment (See instructions regarding type of information required.) <i>Stamps</i>		9 ** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held	
Date <i>4/15/03</i>	Payee name <i>Home Depot</i> Payee address; City; State; Zip Code <i>8138 Agor a Pkwy Selma, TX 78154</i>	Amount (\$) <i>\$18.84</i>	
Purpose of payment (See instructions regarding type of information required.) <i>Rebar</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held	
Date <i>4/15/03</i>	Payee name <i>United States Postal Service</i> Payee address; City; State; Zip Code <i>North Broadway San Antonio, TX 78217</i>	Amount (\$) <i>\$3.41</i>	
Purpose of payment (See instructions regarding type of information required.) <i>Postage</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held	
Date <i>4/4/03</i>	Payee name <i>The Home Depot</i> Payee address; City; State; Zip Code <i>435 Sunset Road San Antonio, TX 78209</i>	Amount (\$) <i>\$10.84</i>	
Purpose of payment (See instructions regarding type of information required.) <i>Fence Picks and Rebar</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held	

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**POLITICAL EXPENDITURES**

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The Instruction Guide explains how to complete this form.		1 Total pages this Schedule 9	
2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>4/10/03</i>	5 Payee name <i>United States Postal Service</i> 6 Payee address; City; State; Zip Code <i>San Antonio, TX 78284</i>	7 Amount- (\$) <i>\$6.92</i>	
8 Purpose of payment (See instructions regarding type of information required.) <i>Postage</i>		9 ** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held	
Date <i>4/7/03</i>	Payee name <i>HEB</i> Payee address; City; State; Zip Code <i>1533 Austin Highway San Antonio, TX 78218</i>	Amount (\$) <i>\$150.00</i>	
Purpose of payment (See instructions regarding type of information required.) <i>Senior citizen function Gift Certificates</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held	
Date <i>4/7/03</i>	Payee name <i>Wal-Mart</i> Payee address; City; State; Zip Code <i>1515 North Loop 1604 East San Antonio, TX 78258</i>	Amount (\$) <i>\$97.28</i>	
Purpose of payment (See instructions regarding type of information required.) <i>Candy for Senior Event</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held	
Date <i>4/11/03</i>	Payee name <i>United States Postal Service</i> Payee address; City; State; Zip Code <i>North Broadway Station San Antonio, TX 78217</i>	Amount (\$) <i>\$0.80</i>	
Purpose of payment (See instructions regarding type of information required.) <i>Postage</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F**

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The Instruction Guide explains how to complete this form.		1 Total pages this Schedule F:
2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission)
4 Date <i>3/28/03</i>	5 Payee name <i>Documart</i> 6 Payee address; City; State; Zip Code <i>8800 Broadway San Antonio, TX 78217</i>	7 Amount (\$) <i>\$244.58</i>
8 Purpose of payment (See instructions regarding type of information required.) <i>Postcards for Campaign</i>		9 ** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held
Date <i>3/28/03</i>	Payee name <i>Allied Advertising</i> Payee address; City; State; Zip Code <i>3700 Blanco Road San Antonio, TX 78212</i>	Amount (\$) <i>\$822.67</i>
Purpose of payment (See instructions regarding type of information required.) <i>Signs</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held
Date <i>4/2/03</i>	Payee name <i>The Catalyst Company</i> Payee address; City; State; Zip Code <i>1110 Branch Spring San Antonio, TX 78258</i>	Amount (\$) <i>\$1,425.36</i>
Purpose of payment (See instructions regarding type of information required.) <i>Design/Print/Mail</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held
Date <i>4/1/03</i>	Payee name <i>Barbecue Station</i> Payee address; City; State; Zip Code <i>1610 NE Loop 410 San Antonio, TX 78209</i>	Amount (\$) <i>\$113.27</i>
Purpose of payment (See instructions regarding type of information required.) <i>Northwood Neighborhood Get-together</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held

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**POLITICAL EXPENDITURES****SCHEDULE F**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages this Schedule F: 9
2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission #) <i>200 APR 28 10:26 AM CITY OF SAN ANTONIO CITY CLERK</i>
4 Date <i>4/3/03</i>	5 Payee name <i>Jim Clamp</i> 6 Payee address; City; State; Zip Code <i>8514 Tiguex Universal City, TX 78148</i>	7 Amount (\$) <i>\$24.10</i>
8 Purpose of payment (See instructions regarding type of information required.) <i>Mileage Reimbursement</i>		9 ** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held
Date <i>3/27/03</i>	Payee name <i>Wal-Mart</i> Payee address; City; State; Zip Code <i>7702 IH35 N San Antonio, TX 78218</i>	Amount (\$) <i>\$9.64</i>
Purpose of payment (See instructions regarding type of information required.) <i>Envelopes</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held
Date <i>3/30/03</i>	Payee name <i>Home Depot</i> Payee address; City; State; Zip Code <i>8138 Agora Pkwy Selma, TX 78154</i>	Amount (\$) <i>\$6.43</i>
Purpose of payment (See instructions regarding type of information required.) <i>Posts</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held
Date <i>3/28/03</i>	Payee name <i>Cutting Edge Courier</i> Payee address; City; State; Zip Code <i>3107 Sagehill St. San Antonio, TX 78230</i>	Amount (\$) <i>\$15.00</i>
Purpose of payment (See instructions regarding type of information required.) <i>Courier service</i>		** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held

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**POLITICAL EXPENDITURES****SCHEDULE F**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages this Schedule F: 9
2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>4/23/03</i>	5 Payee name <i>The Home Depot</i> 6 Payee address; City; State; Zip Code <i>8138 Agora Parkway Selma, TX 78154</i>	7 Amount (\$) <i>\$51.90</i>
8 Purpose of payment (See instructions regarding type of information required.) <i>Stakes</i>		9 ** Complete if direct expenditure to benefit C/OH ** Candidate/Officeholder name Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The Instruction Guide explains how to complete this form.		1 Total pages this Schedule G: 2
2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission) <i>2009 APR 10 2 10 PM CITY OF SAN ANTONIO CITY CLERK</i>
4 Date <i>3/28/03</i>	5 Payee name <i>SBC</i> 6 Payee address; City; State; Zip Code <i>P.O. Box 1780 Houston, TX 77251</i> 7 Purpose of expenditure (See instructions regarding type of information required.) <i>Telephone/fax/internet-April</i>	8 Amount (\$) <i>\$108.00</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <i>4/14/03</i>	Payee name <i>Sprint</i> Payee address; City; State; Zip Code <i>P.O. Box 219554 Kansas City, MO 64121</i> Purpose of expenditure (See instructions regarding type of information required.) <i>Cell Phone-April</i>	Amount (\$) <i>\$291.75</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <i>4/3/03</i>	Payee name <i>Market St. Garage</i> Payee address; City; State; Zip Code <i>421 E. Market St. San Antonio, TX 78205</i> Purpose of expenditure (See instructions regarding type of information required.) <i>Parking</i>	Amount (\$) <i>\$4.50</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <i>4/21/03</i>	Payee name <i>Texaco Food Mart</i> Payee address; City; State; Zip Code <i>8501 Broadway San Antonio, TX 78217</i> Purpose of expenditure (See instructions regarding type of information required.) <i>Gas</i>	Amount (\$) <i>\$10.00</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <i>4/19/03</i>	Payee name <i>Stop N Go</i> Payee address; City; State; Zip Code <i>1203 Austin Highway San Antonio, TX 78209</i> Purpose of expenditure (See instructions regarding type of information required.) <i>Drinks for Campaign Volunteers</i>	Amount (\$) <i>\$6.19</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The Instruction Guide explains how to complete this form.		1 Total pages this Schedule G: 2
2 FILER NAME <i>John G. Clamp</i>		3 ACCOUNT # (Ethics Commission filers)
4 Date <i>3/25/03</i>	5 Payee name <i>The Chamber</i> 6 Payee address; City; State; Zip Code <i>602 E. Commerce San Antonio, TX 78205</i> 7 Purpose of expenditure (See instructions regarding type of information required.) <i>Greater SA Chamber and The Hispanic Chamber Mixer</i>	8 Amount (\$) <i>\$30.00</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <i>3/29/03</i>	Payee name <i>Central Parking System</i> Payee address; City; State; Zip Code <i>118 Losoya San Antonio, TX 78205</i> Purpose of expenditure (See instructions regarding type of information required.) <i>Parking</i>	Amount (\$) <i>\$11.00</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <i>3/26/03</i>	Payee name <i>North Chamber</i> Payee address; City; State; Zip Code <i>12930 Country Parkway San Antonio, TX 78216</i> Purpose of expenditure (See instructions regarding type of information required.) <i>Candidates Night Drinks</i>	Amount (\$) <i>\$5.00</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date <i>3/27/03</i>	Payee name <i>Chevron</i> Payee address; City; State; Zip Code <i>19185 Stone Oak San Antonio, TX 78258</i> Purpose of expenditure (See instructions regarding type of information required.) <i>Gas</i>	Amount (\$) <i>\$18.15</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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